BEST AVAILABLE COPY Application of Docket Number													
PATENT APPLICATION FEE DETERMINATION RECO								Application or Docket Number 10 / 08 4 460					
Effective October 1, 2001								100 41512					
CLAIMS AS ELLED - PART L													
(Calumn 1) (Calumn 2)								SMALL ENTITY OTHER THAI					
TOTAL CLAIMS			22					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	€E 370,00	OR	BASIC FEE	740.00	
TC	TAL CHARGE	2 2 minus 20=		• 2			X\$ 9=		OR	X\$18=	36		
\vdash	DEPENDENT C	み minus 3 ≈		•			X42=		OR	X84=	1 2 2		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					+140=		OR	+280=		
* If the difference in column 1 is less than zero, enter "0" in column 2						column 2			 	4		77/00	
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL	77600	
(Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		CLAIMS REMAINING		HIGH NUM		PRESENT	1 1		ADDI-			ADDI-	
		AFTER AMENDMENT		PREVIO PAID		EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
Š	Total	• 34	Minus	. 6	22	- 12		X\$ 9=		OR	X\$18=	21600	
AME	Independent	• 3	Minus	SENDENG	3			X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM : Paid for 11 over 20.							'	+140=			+280=		
: taid for 11 over 20,							Ł	TOTAL	ļ	OR	TOTAL		
(Column 4)								DOIT. FEE		OR	ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)			T				
AMENDMENT B		REMAINING AFTER	V	NUM! PREVIO	SER	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL	
		AMENDMENT		PAID	FOR	EXITO			FEE			FEE	
	Total	• 34	Minus	• 3	34	- <i>-</i>		X\$ 9=		OR	X\$18=		
MA	Independent FIRST PRESE	NTATION OF MI	Minus ULTIPLE DEF	ENDENT	CLAIM	-4		X42=		OR	X84=	344.00	
Paid for 1 over 20.							۱ ا	+140=		OR	+280=		
								TOTAL DDIT. FEE		OR	TOTAL	344.00	
(Column 1) (Column 2) (Column 3)												·	
၁		CLAIMS REMAINING			BER PRESENT			-	ADDI-			ADDI-	
FIE		AFTER AMENDMENT		PREVIO	USLY	EXTRA		RATE	TIONAL FEE		RATE	TIONAL	
AMENDMENT C	Total	. 33	Minus	- 3	4	. —		X3 9=	PEE	OR	X\$18=	FEE	
ME	Independent	• • 1.0	Minus	***	7	<u> </u>	H			<u>س</u>	20	100	
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							X42=		OR	7.845	w	
	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=		
H	the "Highest Nur	nber Previously Pa	ud For IN THIS	S SPACE is	less than	20, enter "20."	Δ1	TOTAL DOT, FEE		OR ,	TOTAL UDIT, FEE		
1	t vie "Highest Nur The "Highest Num	mber Previously Paid ber Previously Paid	ud For" (N THI! d For" (Total or	s SPACE is Independe	less than nt) is the	n 3, enter "3." highest number			propriate box				

FORM PTO-475 (Rev. 8/01)

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